## PART B - FEE(S) TRANSMITTAL

Complete and send this form, togethe. 1th applicable fee(s), to: Mail Mail Stop IS. 2 FEE
Commissioner for Patents
P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correcte maintenance fee notificat	correspondence including a below or directed oth	ng the Patent, advance	SUE FEE and PUBLIC orders and notification (a) specifying a new co	of m	aintenance fees w	ill be i	mailed to the current	correspondence a	ddress as	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
23416 7590 01/25/2008  CONNOLLY BOVE LODGE & HUTZ, LLP P O BOX 2207  WILMINGTON, DE 19899					Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
								(Deposi	tor's name)	
		(Signature)				(Signature)				
				<u> </u>					(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN		OR ATTORNEY DOCKET NO.		CONFIRMATION NO.			
10/583,726 06/20/2006			Verena Weiskopf		13156-00056-USI 7128					
TITLE OF INVENTION	: NITRILE HYDROGE					·				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DU		
nonprovisional	nonprovisional NO		\$1440 \$300		\$0		\$1740	04/25/20	08	
EXAMINER		ART UNIT	CLASS-SUBCLASS		•					
DAVIS, I	BRIAN J	1621	564-490000							
1. Change of correspondence address or indication of "Fee Address" CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custo Number is required.			(1) the names of user or agents OR, alterical (2) the name of a seregistered attorney registered patent	I. For printing on the patent front page, list  1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  2) the name of a single firm (having as a member a egistered attorney or agent) and the names of up to registered patent attorneys or agents. If no name is sted, no name will be printed.						
PLEASE NOTE: Unl recordation as set forth (A) NAME OF ASSIC BAS	ess an assignee is ident h in 37 CFR 3.11. Comp GNEE F AKTIENGES	ified below, no assign eletion of this form is N	N THE PATENT (print of the data will appear on the NOT a substitute for filing (B) RESIDENCE: (C	he pa g an a	tent. If an assignussignment. and STATE OR C	OUNT	RÝ)	_		
Please check the appropri	iate assignee category or	categories (will not be	printed on the patent):	<u> </u>	Individual XI Co	rporati	on or other private gro	up entity U Gov	/ernment	
4a. The following fee(s) a    Solution	<ul> <li>ib. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fcc(s), any deficiency, or credit any overpayment, to Deposit Account Number 24998 (enclose an extra copy of this form).</li> </ul>									
5. Change in Entity Stat			Dh. Andinos inco	. 1	alaimina CM At	I ENT	FITY status: See 37 CI	TD .1:27(a)(2)		
NOTE: The Issue Fee and	s SMALL ENTITY statu d Publication Fee (if requ	uired) will not be accer	oted from anyone other th						r party in	
interest as shown by the r	ecords of the United Sta	Les Patent and Tradem.	ark Office.		Date Apri	1. 2	5, 2008			
Typed or printed name	Registration No. 52,834									
This collection of informan application. Confident submitting the completed this form and/or suggests Box 1450, Alexandria, V Alexandria, Virginia 223	ation is required by 37 C tiality is governed by 35 I application form to the ons for reducing this bu irginia 22313-1450. DC	ED 1 211 The inform	ation is required to obtain R 1.14. This collection is any depending upon the in the Chief Information OR COMPLETED FORM:	or no sesti indivi office S TC	ctain a benefit by the mated to take 12 reduced to	he publ ninutes mment Traden S. SENI	tic which is to file (and to complete, including s on the amount of tire ark Office, U.S. Depo D TO: Commissioner	by the USPTO to g gathering, prepa ne you require to urtment of Commo for Patents, P.O. B	process) ring; and complete erce, P.O. lox 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.